PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								RD 09/9807/2					
3.00						ımn 2)	SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							RATE		FEE]	RATE	FEE	
FOR			NUMBER	FILED	NUME	BER EXTRA	BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			33 minus 20= *			13	X\$ 9	X\$ 9=		OR	X\$18=	890	
INDEPENDENT CLAIMS			minus 3 =			-]	X40=			OR	X80=	234	
MULTIPLE DEPENDENT CLAIM PI			RESENT				.405		1	.070			
* If the difference in column 1 is less than zero, enter "0" in col						column 2	+135			O.R	+270=	280	
CLAIMS AS AMENDED - PART II							1017	4L		OR	TOTAL	TUAN	
(Column 1) (Column 2						(Column 3)	SMALL ENTITY			OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	** \	33	=	X\$ 9	=		OR	X\$18=		
	Independent	. 4	Minus	***		= ~	X40=	=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM		+135	_		OR	+270=		
					. (1 (1)		TOT				TOTAL		
	(Column 1) (Column 2) (Column 3							ADDIT. FEEON ADDIT. FEE					
AMENDMENT B	Evaluation (Editor)	CLAIMS		HIGH	EST			1	ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9:	=		OR	X\$18=		
	Independent	•	Minus	***		=	X40=			OR	X80=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM			-					
						•	+135			OR	+270=	. —	
							TOT ADDIT. F			OR ,	TOTAL ADDIT. FEE		
_	nvoi outomosti osaasii	(Column 1) CLAIMS	ENTRACTOR SE	(Colum		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=		
	Independent	•	Minus	***		=	X40=			ı	X80=		
۷	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		740=	+		OR	700-		
If the entering polyment in least the entering polymen O weight 40% in returns O										OR	+270=		
••	If the "Highest Nur	nn 1 is iess than th mber Previously Pa mber Previously Pa	id For" IN THI	S SPACE is	less than	n 20, enter [±] 20."	ADDIT, FE			OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					ound in the	арр	ropriate box	in col	umn 1.		